

BEST AVAILABLE COPY

Date	Time	Day
1	0	
2	0	
3	0	
4	0	
5	0	
6	0	
7	0	
8	0	
9	0	
10	0	
11	0	
12	0	
13	0	
14	0	
15	0	
16	0	
17	0	
18	0	
19	0	
20	0	
21	0	
22	0	
23	0	
24	0	
25	0	
26	0	
27	0	
28	0	
29	0	
30	0	
31	0	
32	0	
33	0	
34	0	
35	0	
36	0	
37	0	
38	0	
39	0	
40	0	
41	0	
42	0	
43	0	
44	0	
45	0	
46	0	
47	0	
48	0	
49	0	
50	0	

Date	Time	Day
51	0	
52	0	
53	0	
54	0	
55	0	
56	0	
57	0	
58	0	
59	0	
60	0	
61	0	
62	0	
63	0	
64	0	
65	0	
66	0	
67	0	
68	0	
69	0	
70	0	
71	0	
72	0	
73	0	
74	0	
75	0	
76	0	
77	0	
78	0	
79	0	
80	0	
81	0	
82	0	
83	0	
84	0	
85	0	
86	0	
87	0	
88	0	
89	0	
90	0	
91	0	
92	0	
93	0	
94	0	
95	0	
96	0	
97	0	
98	0	
99	0	
100	0	

Date	Time	Day
101	0	
102	0	
103	0	
104	0	
105	0	
106	0	
107	0	
108	0	
109	0	
110	0	
111	0	
112	0	
113	0	
114	0	
115	0	
116	0	
117	0	
118	0	
119	0	
120	0	
121	0	
122	0	
123	0	
124	0	
125	0	
126	0	
127	0	
128	0	
129	0	
130	0	
131	0	
132	0	
133	0	
134	0	
135	0	
136	0	
137	0	
138	0	
139	0	
140	0	
141	0	
142	0	
143	0	
144	0	
145	0	
146	0	
147	0	
148	0	
149	0	
150	0	

If more than 150 claims or 10 actions
staple additional sheet here

(SEE INSIDE)